PTO/SB/17 (02-07)
Approved for use through 02/28/2007. OMB 0651-0032
at Trademerk Officer IJ S. DEPARTMENT OF COMMERCE

Effect on 1800/2004. FEET TRANS MITTAL For FY 2007 Applicant clams small entity situs. See 37 CFR 1.27 Applicant clams small entity flow. See 37 CFR 1.27 Applicant clams small entity situs. See 37 CFR 1.27 Applicant clams small entity situs. See 37 CFR 1.27 At Unit 1617 TOTAL AMOUNT OF PAYMENT (s) 790.00 METHOD OF PAYMENT (check all that apply) Check Core fit Card Money Order No. Deposit Account tumber, 04-0100 papeat Account teams. FEE CALCULATION 1. BASIC FILING FEES Senal Entity Applicated below, except for the filling fee Continued to the Company of th	Under the Paperwork Reduction Act of	1995, no person are required	o respond to a collectic				control number	
FEE TRANSMITTAL FOR FY 2007 Applicant came a mail entity status. See 37 CFR 1.27 Applicant came a mail entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT Other in Check in Check all that apply) METHOD OF PAYMENT (theoret all that apply) Check in Credit Card Money Order No. Check in Credit Card Money Order Depart Account the	Effective on 12/08/	2004.		Ço				
FOR FY 2007 Applicant claims anad ently status. See 37 CFR 1.27 Applicant claims anad ently status. See 37 CFR 1.27 AT Unix 1617 METHOD OF PAYMENT (sheek all that apply) Check X Credit Card Money Order No. 05598/100K504-US1 METHOD OF PAYMENT (sheek all that apply) Check X Credit Card Money Order Deposit Account through the property of the pr	Fees pursuent to the Consolidated Approp	Application Nur	Application Number		10/624,942-Conf. #7691			
POF PY 2007 Equation Name J. M. K/m	I FEE TRANS	Filing Date	Filing Date					
Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT TOTAL AMOUNT OF	For EV 20				agallo			
TOTAL AMOUNT OF PAYMENT (s) 790.00 Attemory Dodox No. 05986/100K504-US1 METHOD OF PAYMENT (check all that apply) Chack Condition of Check all that apply) Charge foe(s) Indicated below. Darby P.C. For the above-identified eposial account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below. Charge fee(s) indicated below. except for the filing fee (check all that apply) Charge fee(s) indicated below. Charge fee(s) indicated below. except for the filing fee (check all that apply) FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES SMAIL Entity Application Type Fee (s) Fee (,U1	Examiner Name	Examiner Name J. M. Kir			im	
METHOD OF PAYMENT (check all that apply)		JS. See 37 CFR 1.27	Art Unit	Art Unit 1617				
Check X Credit Card Money Order None Other (please identify): Deposit Account Expess Account Number 04-0100 (pages Account Name Darby & Darby P.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge feet(s) indicated below Charge feet(s) indicated below Charge feet(s) indicated below X Cherge are y additional feet(s) or underpayments of X Credit any overpayments FEE CALCULATION 1. BASIC PILING, SEARCH, AND EXAMINATION FEES FILING FEES Small Entity Entity Specification Type Entity Entity Specification 150 Solo 250 Solo 250 Solo 150 Solo 250 Solo 300 Solo	TOTAL AMOUNT OF PAYMENT	(\$) 790.00	Attorney Docket	No.	05986/100K5)4-US1		
Deposit Account Inspect Account Number 04-0100 Deposit Account Itame Dartry & Dartry P.C.	METHOD OF PAYMENT (check	all that apply)			7			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below Charge fee(s) thickated below, except for the filling fee Charge fee(s) thickated below, except for the filling fee Charge fee(s) thickated below, except for the filling fee Charge fee(s) thickated below, except for the filling fee Charge fee(s) thickated below, except for the filling fee Charge fee(s) thickated below, except for the filling fee Charge fee(s) thickated below, except for the filling fee Charge fee(s) thickated below, except for the filling fee Charge fee(s) thickated below, except for the filling fee Charge fee(s) thickated below, except for the filling fee Charge fee(s) thickated below Charge fee(s) thickated bel	Check X Credit Card	Money Order N	one Other	(piçase ide	ntify):			
Charge fee(s) Indicated below, except for the filling fee Charge fee(s) Indicated below, except for the filling fee Charge any additional fee(s) or underpayments of Credit any overpayments	Deposit Account Deposit Account	tumber: 04-0100 Deposit A	ccount Name:		Darby & Darby	P.C.		
Credit any ovarpayments Credit any ovarp	For the above-identified depo	sit account, the Director	is hereby authorize	ed to: (che	eck all that apply)			
Test	Charge fee(s) indicated	below	Charg	e fee(s) li	ndicated below, e	xcept for t	he filing fee	
BASIC FILING, SEARCH, AND EXAMINATION FEES SIMULE OF FEES Fee (\$) Fee			of x Credit	any over	payments			
FILING FEES SMAIL	FEE CALCULATION							
Small Entity	1. BASIC FILING, SEARCH, AND E.	CAMINATION FEES						
Application Type Fee (5) Fee (5) Fee (7) Fee (8) Fee (8) Fee (8) Fee (9) Fee (FI			EXAM		:		
Delaign	Application Type Fee (\$			Fee (S		Fees	Paid (\$)	
Design								
Plant		100 10	50	130	65			
Reissue		100 30) 150	160	80			
Provisional 200 100 0 0 0 0 0 0 0 0					300			
2. EXCESS CLAIM FEEL Section Fee (1) Fee (2) Fee (2) Fee (2) Fee (3) Fee (3) Fee (4) Fee (4) Fee (4) Fee (5) Fee (6)								
Rec Becification Fee (5) Fee (6) Fee (7) Fee (100	, ,	•	•		Small Entity	
Each claim over 20 (including Reissues) 50 25						Fee (\$)		
Multiple dependent claims Total Claims Extra Claims 11 - 20 - 0 x 0 x 0 x 0 x 0 x 0 x 0 x 0 x 0 x		ues)				50	25	
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11 20 = 0 x 0	Multiple dependent claims					360	180	
IP - Riphent number of lotal citiens pade for, Egreener then 20. Indep. Claims Extra Cisiens Fee (5) Fee (5) Fee Paid (5) IIP - Riphent number of independence citient pade for, Egreener than 20. IIP - Riphent number of independence citient pade for, Egreener than 20. IIP - Riphent number of independence citient pade for, Egreener than 20. APPLICATION SIZE FEE If the specification and drawings exceed 100 shects of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.2(6), the application size fee due is \$250 (5125 for small entity) for each additional 50 shects or fraction thereof. See 35 U.S.C. 41(a)(1/(c)) and 37 CFR 1.16(a). Total Sizes Saving Savi	Total Claims Extra Claims	Fee (5) Fee	Paid (\$)		Multiple Depend	ent Claims		
Indepo. Claims 1 -3 - 0				E	ee (\$)	Fee Paid ((3	
1 -3 - 0 x 0 - 1 When highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.3(c)), the application size fee due is \$2.30 (\$1.25 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1/(s) and 37 CFR 1.16(s). Total Sizess	HP = highest number of total claims paid for	, if greater than 20.		_			_	
IPP - hipsent number of independence claims paid for, if greater than 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filled sequence or computer listings under 3° CFR. 12(0.0), the application size fee due is \$2.50 (\$1.25 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR. 1.16(s). Total Sheets Fee (\$) Fee (\$) Fee Paid (\$) Non-English Specification, \$1.30 fee (no small entity discount) Other (c.g., late filling sycharge): 1801 Request for continued examination (RCE) (see 37 790.00 SUBMITTED BY SUBMITTED BY Transporter Transporte			Paid (\$)					
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CER 1.32(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See \$5 U.S.C. 41(e)(1)(3) and 37 CER 1.16(e). Total Siness Source of the state of th								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CRF. 125(0), the applications rise fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CRF. 1.16(s). Total Sitests State Sheets Number of each additional 50 or fraction. Interest Fee (\$\frac{1}{2}\$) Total Sitests Number of each additional 50 or fraction. Interest Fee (\$\frac{1}{2}\$) The Paid (\$\frac{1}{2}\$) NOTHER FEE(\$\frac{1}{2}\$) NOH-Deglish Specification, \$130 fee (no small entity discount) Other (c.g., late filing sycharge): 1801 Request for continued examination (RCE) (see 37 T90.00 Submitted BY Spentage Requirements Requir		paid for, if greater than 3.		_				
Isitings under 37 CR 1.52(e)), the application size fee due is \$3.20 (\$31.25 for small entity) for each additional 50 sheets or fraction thereofs. Set 50 U.S. cd. ([a)((1)(3) and 37 CR 1.16(s)). Total Sheets			- (lindialoata		Clad			
sheets of fraction thercof. Sec 35 U.S.C. 41(a)(1/(3) and 37 CFR. I.16(s). Total Sheets State State Number of each additional size or fraction. Barsof (Fee (5) Fee (5) Fee Paid (5) Non-Ibnglish Specification, \$130 fee (no small cutity discount) Other (c.g., late filing sycharge): 1801 Request for conflued examination (RCE) (see 37 790.00 Unionity Ed. (See 37 790.00 Spontare Region (212) 527-7700							0	
4. OTHER FEE(s) Non-English Specification, \$130 fee (no small cutity discount) Other (c.g., late filing sycharge): 1801 Request for confluence dexamination (RCE) (see 37 790.00 Signature Requistration Ro. Requisitation Ro. Requisitat					,,		•	
4. OTHER FEE(s) Non-Reglish Specification, \$130 fee (no small entity discount) Other (e.g., late filing syrcharge): 1801 Request for continued examination (RCE) (see 37 790.00 SUBMITTED BY Registration No. Attemptophong 52,392 Telephone (212) 527-7700	Total Sheets Extra Sheet	Number of each	additional 60 or fram	ction there	of Fee (\$)	Fee	Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing syrcharge): 1891 Request for continued examination (RCE) (see 37 790.00 Signature 7 Requirement No. Administration (RCE) (see 37 790.00 Requirement No. Administration No. Administra	- 100 ==	/50	(round up to a who	ole number) ×			
Other (e.g., late filling sycharge): 1801 Request for continued examination (RCE) (see 37 790.00 SUBMITTED BY Signature Registration No. (Attorney/Japan) 52,392 Telephone (212) 527-7700	4. OTHER FEE(S)					Fees	Paid (\$)	
Supartire								
Signature Registration No. (Altomoy/Agent) 52,392 Telephone (212) 527-7700	Other (e.g., late filing surcharge):	1801 Request for co	ntinued examina	tion (RC	E) (see 37	79	90.00	
	SUBMITTED BY							
Neme (Print/Type) Paul M. Zagar June 5, 2007	Signature ////4	W	Registration No. (Attorney/Agent)	52,392	2 Telephone	(212) 52	7-7700	
	Neme (Print/Type) Paul M. Zagar	77			Dete	June 5	2007	

AMENDMENT TRANSMITTAL LETTER						Docket No. 05986/100K504-US	
Application No.		Filing Date			Examiner	Art Un	
10/624,942-Cd	onf. #7691	July 21,	2003		J. M. Kim	1	1617
oplicant(s): Mar	co Pappagallo						
vention: TREAT	MENT OF SPI	NAL MECHAN	NCAL PAIN				
		THE COMMI				-	
ransmitted here he fee has beer					plication.		
		CLAIM	S AS AMENI	DED			
	Claims Remaining After Amendment	Highest Number Previously Pald	Number Extra Claims Present		Rate		
Total Claims	11	- 20 =	0	х	50.00	_	0.00
Independent Claims	1	- 3 =	0	х	200.00		0.00
Multiple Depend	lent Claims (ch	eck if applicabl	e)				
Other fee (pleas	e specify):						
TOTAL ADDIT	ONAL FEE FO	OR THIS AME	NDMENT:				0.00
x Large Entity					Small Entity		
x No additiona	Il fee is require	d for this ame	ndment.				
	ge Deposit Acc		ir	the a	mount of \$ _		·
A check in the	ne amount of \$		to cover	the fili	ng fee is encl	osed.	
Payment by	credit card.						
X The Director as described	is hereby auth below. A dup					04-0	0100
	ny overpaymer any additional fili				muirod undor 2	7 CED 4 14	2 and 1 17
x Charge a	A. A.	ng or application	in processing i	ees le	Dated:		
Paul M. Zagar Attorney/Agent	Reg. No.: 52,	392				_ouno o, i	
DARBY & DAR P.O. Box 770 Church Street S							
New York, New (212) 527-7700		770					
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